

#13 Am dt D
Smw 9-20-02



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): T. Allan Hamilton
Assignee: ZiLOG, Inc.
Title: Signal Receiver Having Wide Band Amplification Capability
Application No.: 09/212,203 Filing Date: December 15, 1998
Examiner: Hanh Phan Group Art Unit: 2633
Docket No.: M-12660 US Conf. No.: 8736

San Francisco, California
September 13, 2002

BOX NON-AMENDMENT
COMMISSIONER FOR PATENTS
WASHINGTON, D. C. 20231

AMENDMENT

RECEIVED
SEP 19 2002
Technology Center 2600

Sir:

In response to the Office Action dated June 13, 2002, please amend the above-identified patent application as follows:

IN THE CLAIMS:

Cancel claims 11 – 13 without prejudice.

Amend claim 9 in the manner shown in the attached “Amended Claims with Markings to Show Changes Made.”

All of the claims remaining in the present application after this Amendment are given in the attached “Text of All Application Claims After Amendment.”

Application No.: 09/212,203
Express Mail No.: EV212982607US

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SEP 13 2002

Docket No.: M-12660 US

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Box Non-Fee Amendment
Commissioner For Patents
Washington, D.C. 20231

Re:	Applicant(s):	T. Allan Hamilton
	Assignee:	ZiLOG, Inc.
	Title:	Signal Receiver Having Wide Band Amplification Capability
	Application No.:	09/212,203
	Examiner:	Hanh Phan
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	Conf. No.:	8736
	Filed:	December 15, 1998
	Group Art Unit:	2633

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate); and
- (3) Amendment (7 pages).

- ☒ No additional fee is required.
- ☐ The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining <u>After Amendment</u>		Highest No. Previously <u>Paid For</u>		Present <u>Extra</u>		<u>Rate</u>		Additional <u>Fee</u>
Total Claims	12	Minus	20	=	0	x	\$18.00	\$	0.00
Independent Claims	3	Minus	5	=	0	x	\$84.00	\$	0.00
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application							\$	
<input type="checkbox"/>	Fee for Request for Extension of Time							\$	
<u>Total additional fee for this Amendment:</u>								\$	<u>0.00</u>
<input checked="" type="checkbox"/>	Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.								
<input checked="" type="checkbox"/>	Please charge our Deposit Account No. 19-2386 in the amount of							\$	<u>0.00</u>
<input checked="" type="checkbox"/>	Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 19-2386.								
Total:								\$	0.00

EXPRESS MAIL LABEL NO.:

EV212982607US

Respectfully submitted,

Gerald P. Parsons

Gerald P. Parsons
Attorney for Applicant(s)
Reg. No. 24,486